

City of Atlanta
Department of Planning and Community Development
Bureau of Planning, Current Planning Division, Suite 3350
(404) 330-6145

SUBMITTAL CHECKLIST
for
SPECIAL USE APPLICATION

- _____ 1. Submit complete **APPLICATION** with notarized signatures.
- _____ 2. Submit **DOCUMENTED IMPACT ANALYSIS** based on criteria outlined in application form.
- _____ 3. Submit notarized **AUTHORIZATION(S) OF PROPERTY OWNER(S)**, if other than applicant (see Attachment 1).
- _____ 4. Submit **AUTHORIZATION OF ATTORNEY**, if an attorney is filing the application on behalf of a property owner (see Attachment 2).
- _____ 5. Submit a copy of a survey ("plat of survey") and a written **LEGAL DESCRIPTION** in metes and bounds. Application will not be accepted without a legal description.
- _____ 6. Submit fourteen folded copies of a **SITE PLAN**, drawn to scale, showing existing and proposed conditions including streets, footprints of buildings, parking layout, driveways, north arrow, scale, and seal of professional preparer (see **Instructions, item C**).
- _____ 7. File application with Bureau of Planning Current Planning Division.
- _____ 8. Pay fee (see Attachment 3). Make check payable to "City of Atlanta".
- _____ 9. Obtain copy of the **NOTICE TO APPLICANT** regarding the Zoning Review Board (ZRB) hearing date, meeting dates, the Neighborhood Planning Unit (NPU) contact person and the NPU meeting date.
- _____ 10. Consult with NPU contact person and attend necessary meeting(s), including any applicable neighborhood association meetings.
- _____ 11. Attend Zoning Review Board (ZRB) public hearing.

NOTE: On closing day, applicants must sign in at the Bureau of Planning by 3:00 P.M. to ensure processing and scheduling for the corresponding public hearing date. If the applicant signs in after 3:00, the application will be scheduled for the following month's public hearing (see attached public hearing schedule).

Please do not hesitate to contact the Bureau of Planning to discuss your application with a staff planner after filing your application. The staff recommendation for your application will be available on the Tuesday before the first ZRB hearing of the month.

APPLICATION FOR SPECIAL USE PERMIT

City of Atlanta

Date Filed _____ Application Number _____

I Hereby Request That The Property Described in this Application be granted a Special Use Permit

Name of Applicant _____

Last Name

First Name

M.I.

Address _____ Street Name _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

E-mail address _____

Name of Property Owner _____

Last Name

First Name

M.I.

Address _____ Street Name _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

E-mail address _____

Description of Property

Address of Property _____ Street Name _____

City _____ State _____ Zip Code _____

The subject property fronts _____ feet on the _____ side of _____

beginning _____ feet from the _____ corner of _____

Depth: _____ Area: _____ Land Lot: _____ Land District: _____ - _____ County, GA.

Property is zoned: _____ Council District: _____ Neighborhood Planning Unit: _____

INSTRUCTIONS

- A. SUMMARY OF PROPOSED PROJECT.** Describe the proposed project in the space provided below. Include the proposed use of each building and all other land uses. This description is required in addition to the Documented Impact Analysis and is not considered a substitute. Should additional space be required please type or print on a separate piece of paper.

- B. DOCUMENTED IMPACT ANALYSIS.** Each application must contain a typed or printed documented analysis of the impact of the proposed Special Use Permit with respect to the City of Atlanta Zoning Ordinance. This analysis should address the following matters.

- Ingress and egress to the property and proposed structure or uses thereon, with particular reference to automotive and pedestrian safety and convenience, traffic flow and control, and emergency access.
- Off-street parking and loading areas where required, with particular attention to the items above.
- Disposal of refuse; Location of service/delivery areas.
- The need (or lack of need) for appropriate buffering or screening to alleviate such potentially adverse effects as may be created by noise, glare, odor, lighting, signs or traffic congestion.
- Proposed Hours and manner of operation. (for example, number of employees, number and ages of clients to be served by your facility, meal programs, if any, etc.)
- Length of time regarding the duration of the request for a Special Use Permit.
- Tree preservation and replacement in accordance with the requirements of the City of Atlanta Tree Ordinance.
- Whether or not required yards and other open spaces are met.

- C. PROCEDURAL REQUIREMENTS.** This application must be accompanied by detailed plans, showing exact lot dimensions, location and size of the buildings, structures existing or improvements to be placed on the site; the specific use of each building, structure, property or part thereof; detailed arrangement or required parking spaces, location and means of ingress and egress. Additional topographic information may be required where deemed necessary by the Zoning Administrator.

The plans shall be prepared signed and sealed by a State of Georgia registered architect, engineer, landscape architect, or planner who holds membership in the American Planning Association, competent in preparation of detailed and accurate plans, drawn to scale. Said person shall indicate on the plan their state registration number and shall certify that they are familiar with the City of Atlanta Zoning Ordinance, including revisions, and that to the best of their ability, these plans are accurate and comply with the general and district regulations of the zoning ordinance.

- D. TREE PRESERVATION.** The City of Atlanta Tree Ordinance requires that “No permit shall be issued for the removal or destruction of any tree unless (1) A tree replacement plan meeting the requirements of Section 158-103 has been approved.” Contact the City Arborist, (404) 330-6150 for details.
- E. PROPERTY DESCRIPTION.** A copy of a recent plat of survey prepared by an engineer or land surveyor registered in the State of Georgia must accompany each application. In addition, a written legal description must be submitted. In cases involving more than one contiguous property, a consolidated legal description of the property must be submitted.
- F. HEARING DATES AND PROCESSING OF APPLICANTS.** See attached Zoning Review Board Schedule.

G. MEETING WITH NEIGHBORHOOD PLANNING UNIT. (NPU) You must contact the appropriate Neighborhood Planning Unit (NPU) within two business days after filing your Special Use Permit application to appear before them prior to the public hearing of the Zoning Review Board. The name and phone number of the contact for the NPU will be provided at the time that you file your application.

H. FEES. See attached fee schedule, *Attachment 3*.

I. AUTHORIZATION TO INSPECT PREMISES. I hereby authorize the staff of the Bureau of Planning of the City of Atlanta to inspect the premises, which are the subject of this Special Use Permit application.

I swear and affirm that the information contained in this application is true and accurate to the best of my knowledge and belief.

Owner or Agent of Owner (Applicant)

Sworn to and subscribed before me this _____ day of _____, 2_____.

(Notary Public)

AUTHORIZATION BY PROPERTY OWNER

(Required only if applicant is not the owner of property subject to the proposed Special Use Permit)

I, _____ (OWNER'S NAME)

SWEAR AND AFFIRM THAT I AM THE OWNER OF THE PROPERTY AT _____
_____ (PROPERTY ADDRESS).

AS SHOWN IN THE RECORDS OF _____ COUNTY, GEORGIA, WHICH
IS THE SUBJECT MATTER OF THE ATTACHED APPLICATION. I AUTHORIZE THE
PERSON NAMED BELOW TO FILE THIS APPLICATION AS MY AGENT.

NAME OF APPLICANT

LAST NAME _____ FIRST NAME _____

ADDRESS _____ STREET NAME _____ SUITE _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE NUMBER

AREA CODE () NUMBER _____ - _____

Signature of Owner

Print name of owner

Personally Appeared Before Me this _____ day of _____, 2____.

Notary Public

AUTHORIZATION OF ATTORNEY

I SWEAR AND AFFIRM, AS AN ATTORNEY AT LAW, THAT I HAVE BEEN AUTHORIZED BY THE OWNER OF THE PROPERTY SUBJECT TO THE PROPOSED REZONING TO FILE THIS APPLICATION.

SIGNATURE OF ATTORNEY

NAME

ADDRESS

CITY

STATE

ZIPCODE

TELEPHONE NUMBER

FEE SCHEDULE (Special Use Permit applicants refer to item B. below)

A. REZONING APPLICATIONS. Rezoning application fees shall be based on the zoning district for which an applicant applied and upon the size of the property for which the application is made to the following schedule:

1.) To R-1, R-2, R-2A, R-3, R-3A, R-4, R-4A, or R-4B	\$ 500.00 All Classifications
2.) To R-5, RG, PDH, or MR	
1 acre or less	\$500.00
1+ to 5 acres	\$625.00
5+ to 10 acres	\$750.00
10+ acres	\$1250.00
3.) To R-LC, O-I, C-1, C-2, C-4, C-5, I-1, & or I-2	
1 acre or less	\$1000.00
1+ to 5 acres	\$1500.00
5+ to 10 acres	\$2000.00
10+ acres	\$3000.00
4) To C-3, PD-OC, PD-MU, PD-BP, LW, or MRC	
1 acre or less	\$3000.00
1+ to 5 acres	\$4500.00
5+	\$6000.00
5) To any Special Public Interest (SPI) District	\$3000.00
6) No fee shall be charged for residential rezoning R-1, R-2, R-2A, R-3A, R-4, R-4A, R-4B, R-5, RG, PD-H when consistent with the Comprehensive Development Plan (CDP) land use map.	
B. SPECIAL USE PERMITS	\$400.00 All Classifications
C. SITE PLAN AMENDMENT APPLICATIONS. Site Plan Amendment fees shall be based on the zoning district in which the subject property is located and upon the size of the property for which the application for amendment is made according to the following schedule:	
1) In R-1, R-2, R-2A, R-3, R-3A, R-4, R-4B	\$500.00 All Classifications
2) In R-5, RG, or PD-H	
1 acre or less	\$500.00
1+ to 5 acres	\$625.00
5+ to 10 acres	\$750.00
10+ acres	\$1250.00
3) In R-LC, O-I, C-1, C-2, C-4, C-5, I-1, or I-2	
1 acre or less	\$1000.00
1+ to 5 acres	\$1500.00
5+ to 10 acres	\$2000.00
10+ acres	\$2500.00
4) In C-3, PD-OC, PD-MU, or PD-BP	
1 acre or less	\$2500.00
1+ to 5 acres	\$3250.00
5+	\$4000.00
D. TRANSFER OF OWNERSHIP APPLICATIONS	\$200.00 All Classifications
E. COMPREHENSIVE DEVELOPMENT PLAN (CDP) AMENDMENTS. Applications for Rezoning or Site Plan Amendments that are deemed by the Bureau of Planning to require consideration by the City Council to change the Land Use Element of the CDP shall require, in addition to fees stated elsewhere, a fee of \$1000.00	

**REVISED 12-30-02 - CITY OF ATLANTA
BUREAU OF PLANNING
2003 ZONING REVIEW BOARD SCHEDULE
6:00 P.M., CITY HALL, COUNCIL CHAMBER, SECOND FLOOR**

CLOSING DATE	ZONING REVIEW BOARD	ZONING COMMITTEE	CITY COUNCIL
November 12, 2002	January 7, 2003 January 9, 2003	January 29, 2003	February 3, 2003
December 10, 2002	February 6, 2003 February 13, 2003	February 26, 2003	March 3, 2003
January 14, 2003	March 6, 2003 March 13, 2003	April 2, 2003	April 21, 2003
February 11, 2003	April 3, 2003 April 10, 2003	April 30, 2003	May 5, 2003
March 11, 2003	May 1, 2003 May 8, 2003	May 28, 2003	June 2, 2003
April 8, 2003	June 5, 2003 June 12, 2003	July 2, 2003	July 7, 2003
May 13, 2003	July 8, 2003 July 10, 2003	July 30, 2003	August 18, 2003
June 10, 2003	August 7, 2003 August 14, 2003	August 27, 2003	September 2, 2003
July 8, 2003	September 4, 2003 September 11, 2003	October 1, 2003	October 6, 2003
August 12, 2003	October 2, 2003 October 9, 2003	October 29, 2003	November 3, 2003
September 9, 2003	November 6, 2003 November 13, 2003	November 26, 2003	December 1, 2003
October 14, 2003	December 4, 2003 December 11, 2003	January 14, 2004	January 20, 2004

JOHN A. BELL, SECRETARY TO THE BOARD
PATRICIA TINCH, LEGAL SECRETARY
330-6145